

Did you live in this area
between
December 26, 1944
and
December 31, 1957?

If so, you may be
interested in a **new service**
from the state health
agencies of Idaho, Oregon and
Washington.

SEE DETAILS BELOW

Hanford Individual Dose Assessment Project

How to Get Your Hanford Radiation Dose Estimate

Individual Thyroid Dose Estimate for Iodine 131 Released into the Air
from Hanford, December 26, 1944 - December 31, 1957

- You can now get an estimate of the amount of iodine 131 your thyroid gland absorbed from this radioactive iodine released into the air by the Hanford Nuclear Reservation.
- With your radiation dose estimate, you will receive more information about radiation and health, and how you can use this information.
- This brochure explains how to get started.

Between December 26, 1944 and December 31, 1957, the Hanford Nuclear Reservation released into the air more than 730,000 curies of iodine 131, a radioactive iodine. Many people who lived or spent time in the exposed areas want to know what radiation dose they received. A radiation dose is the amount of radioactive energy absorbed by all or part of the body.

The state health agencies of Washington, Oregon and Idaho developed the Hanford Individual Dose Assessment (IDA) Project to provide a radiation dose estimate to you as a service. There is no charge. This is a service for you and not part of a study.

Who can receive a radiation dose estimate?

Check the map inside this brochure. Did you live or spend time within the area marked by the large box ("HEDR study area")? Were you there between December 26, 1944 and December 31, 1957? If your answer to both questions is "yes," the Hanford IDA Project can provide you with your dose estimate.

Some of the releases went beyond this area, but doses can be calculated only for people who were within the HEDR study area.

How does the radiation dose estimate service work?

You will need to fill out and return the enclosed *Your Residence History* form with your current information and your past residences between 1944 and 1957. You will then receive a *Your Diet History* form asking about the milk you drank and foods you ate at that time. After you provide that information, your dose estimate will be calculated and mailed to you.

You will receive an *estimate* of your thyroid dose from iodine 131 exposure. This is not an exact radiation dose measurement. The dose estimate will not represent your total radiation dose from Hanford or your total radiation dose for exposure from any other source. The dose estimate does not include exposures for people while they worked at or on the Hanford Nuclear Reservation itself.

If you have questions, or need materials in large print or translated into another language, call toll-free: 1-800-432-6242.

P.O. Box 47875 Olympia, WA 98504-7875

Call toll-free 1-800-432-6242 or (360) 236-3287 For TDD/TTY service, call (360) 236-3288

Web-site: <http://www.doh.wa.gov/ida>



Idaho
Department of Health and Welfare
Division of Health



A public service program of
Oregon
Department of Human Resources
Health Division



Washington State
Department of Health

in cooperation with the Centers for Disease Control and Prevention (CDC)

Why is iodine 131 important?

The iodine 131 Hanford released into the air accounted for more than 98 percent of the radiation dose that most people received. The releases spread over a wide area. People were exposed by drinking cow's or goat's milk, eating vegetables, fruits and other foods, and breathing contaminated air. Milk contributed more to a person's thyroid dose than other foods. Once in the body, iodine concentrates in the thyroid gland. This is why the dose estimates are for the dose to the thyroid.

What does a radiation dose from iodine 131 mean for your health?

Radiation exposure and health is still an emerging area of science. Receiving a radiation dose from Hanford's iodine 131 releases may have increased the risk of disease. Having an increased risk does not necessarily mean you will get sick. It means the chances of developing a disease are higher. If a problem occurs, it is most likely to be in the thyroid gland.

How can you use your dose estimate?

You can talk with your health care provider about your exposure and your thyroid dose estimate. Some people will save their dose estimate with their health records. Your dose estimate may be useful in determining if you are eligible for a medical monitoring program that the Agency for Toxic Substances and Disease Registry has proposed.

How will your dose estimate be calculated?

The Hanford IDA Project will use the computer models created by the Hanford Environmental Dose Reconstruction (HEDR) Project. The HEDR Project gathered information about Hanford's releases and

built complex computer models to calculate thyroid dose estimates. The models cover a 75,000 square-mile area (see map) for December 26, 1944 through December 31, 1957. Those were the years when almost all the iodine 131 was released into the air.

Most of the information needed for your dose estimate is built into the computer models. This includes the amounts of iodine 131 released, when releases occurred, the weather and wind direction, milk production in the area, and many other factors.

Why do you need to provide your individual information?

Your dose estimate needs to take into account some information about *you*. This includes: how old you were when exposed to the iodine 131; your gender; exactly where you lived or spent time; which years you were there; how much milk you drank; if your milk came from your family's (or a neighbor's or friend's) cow or from a dairy or a store; and how much of certain fresh foods you ate. Because this information is specific to you, your dose estimate will not be the same as a family member's or neighbor's dose estimate.

Will dose estimates be offered in the future for other types of radiation?

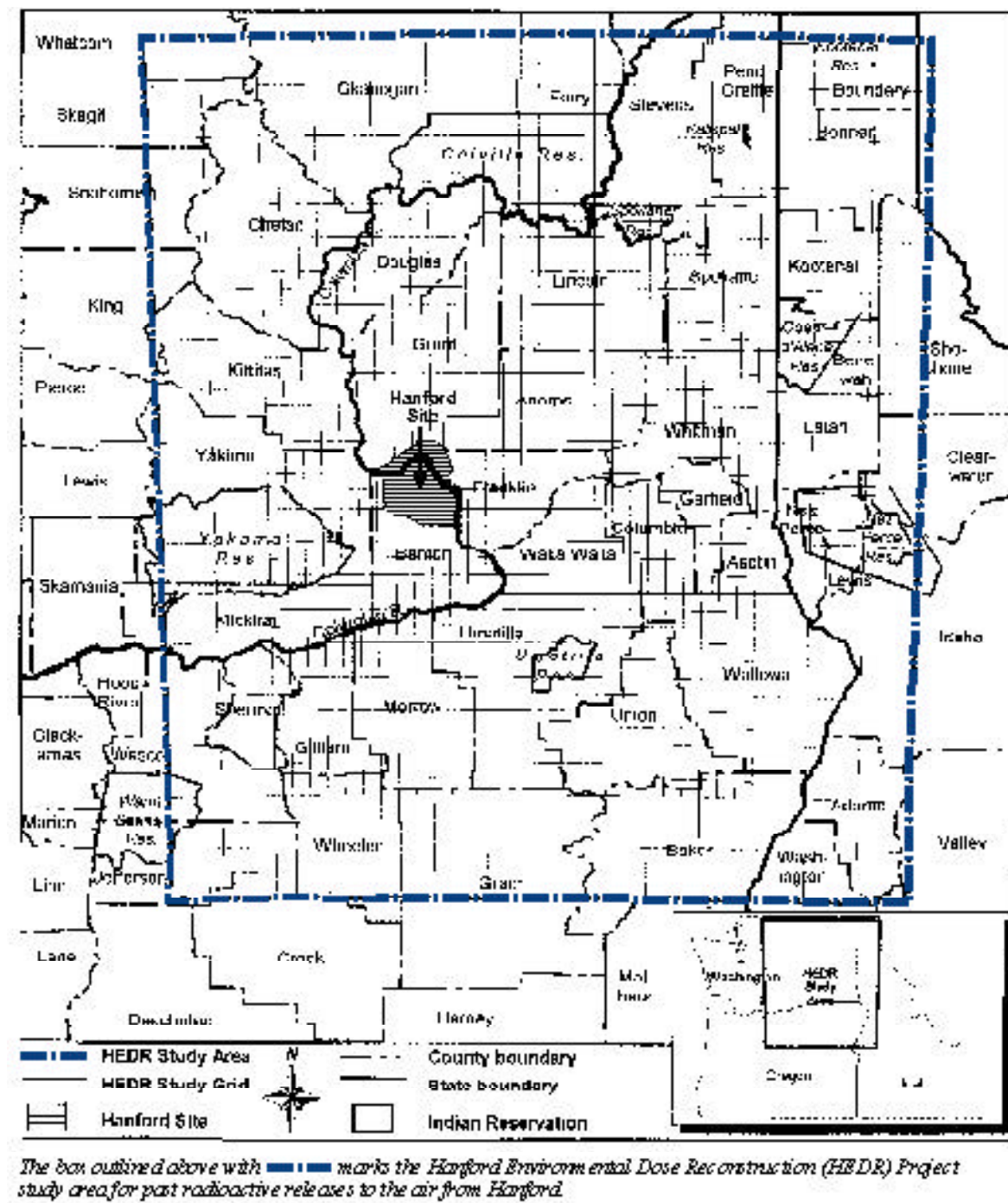
Hanford released many other types of radioactive materials into the air, the soil and the Columbia River. At present, the Hanford IDA Project can estimate only the radiation dose to your thyroid from the iodine 131 Hanford released into the air. After more scientific work and depending on funding, the Project may be able to offer dose estimates for other exposures from Hanford.

How to get started

1. Decide if you are eligible to receive a dose estimate. See the map below.
2. Fill out the enclosed *Your Residence History* form. Be sure to read the "Public Disclosure Notice."
3. Mail in *Your Residence History* form promptly. This is a time-limited program. We recommend that you send this form to us within 60 days.

Questions? Call 1-800-432-6242

Who can receive a radiation dose estimate?



Did you live or spend time within the HEDR study area? Were you there between December 26, 1944 and December 31, 1957? If your answer to both questions is “yes,” the Hanford Individual Dose Assessment (IDA) Project can estimate the iodine 131 radiation dose to your thyroid.

The cross-hatched lines (grid lines) on this map divide the HEDR study area into 1,102 sections. To estimate your individual dose, the Hanford IDA Project needs to know in which of these section(s) you lived or spent time. *Your Residence History* asks for your past addresses so that the Hanford IDA Project can select the right section(s) to calculate your dose estimate. Your birth date and gender are also needed to calculate your dose estimate.

Hanford Individual Dose Assessment Project

Your Residence History

Filling out this residence history is the first step in receiving your iodine 131 thyroid dose estimate. This form asks for your gender and birth date, and where and when you lived or spent time in the study area used by the Hanford Environmental Dose Reconstruction (HEDR) Project. *See inside the “How to Get Your Hanford Radiation Dose Estimate” for a map of the area.* If you were born within this area between December 26, 1944 and December 31, 1957, you will also need to list the location(s) where your mother lived when she was pregnant with you.

Do you remember where you lived or spent time?

To help gather this information, many people talk with family; look at old letters, pictures and address books; check old employment records; or call friends.

We ask for your past addresses to help us identify in which of the 1,102 sections in the HEDR study area you lived. If you can tell us the street where you lived or the names of streets near where you lived, we will probably be able to find the right section. We will then send you a map of your section(s) and ask you to check if this is correct.

What if you can't find an old address? Or you don't have an exact address?

If you don't have an exact street address, or if you have a rural route number or post office box, please describe where you lived. For example, did you live in town or outside of town? How far away (in miles) and in what direction? Did you live close to a river, bridge, highway crossing or dam? Details such as these will help us to correctly identify on a map the location where you lived. Add a sheet of paper if you need more space.

Public Disclosure Notice

Under the State of Washington Public Disclosure Act, public records kept by state agencies are subject to disclosure to the public. To comply with this law, upon request, the Washington State Department of Health must disclose information provided to the department on *Your Residence History*, *Your Diet History* and information contained in your dose estimate packet.

However, **participants' names, addresses, including addresses pinpointed on residence maps, and current telephone numbers *will not be included*** in any materials that are released to the public, unless the Department of Health is directed to release the information by a court of law.

If you have questions, or need materials in large print or translated into another language, call toll-free: 1-800-432-6242.

Your Residence History

Section A: Current Information Please fill out this section completely. Print clearly or type.

Name:	_____ / _____ / _____ / _____
	First Middle Initial Last (Jr., Sr., etc.)
Address:	_____
City:	_____ State: _____ Zip: _____ Phone: (_____) _____
Gender:	Female Male (circle one)
Birth date:	_____ — _____ — _____
	Month Day Year

Section B: Time Spent Outdoors

For the majority of time you spent in the HEDR study area between December 26, 1944 and December 31, 1957, did you live outdoors or in any of the following structures: tent, rough cabin, lean-to, wickiup, tipi, brush shelter, or other structure open to the air or poorly sealed from the outdoors?

Please circle yes or no: Yes No

Section C: Residences

- Please list only the addresses where you lived or spent time in the HEDR study area between December 26, 1944 and December 31, 1957. If you need more space, make a copy or add a sheet of paper.
- If you were born during this time period and in this area, start with the addresses where your mother lived when she was pregnant with you.
- Fill in the Start Date and End Date for each location. You may include times as short as **1 week for 1945** and as short as **1 month for 1946-1957**. You need to provide the month, day and year. If you do not know them exactly, estimate the best you can.
- For each location, please answer the question about drinking milk from a cow owned by your family, a friend, relative or neighbor. This does not include processed commercial milk.

Example	Start Date	<u>12</u> — <u>26</u> — <u>1944</u>	End Date	<u>10</u> — <u>21</u> — <u>1945</u>
		Month Day Year		Month Day Year
	Address <u>1234 Sunny Lane</u>		City <u>Spokane</u> State <u>WA</u>	
At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO				

1	Start Date	_____ — _____ — <u>19</u>	End Date	_____ — _____ — <u>19</u>
		Month Day Year		Month Day Year
	Address		City State	
At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO				

2	Start Date	_____ — _____ — <u>19</u>	End Date	_____ — _____ — <u>19</u>
		Month Day Year		Month Day Year
	Address		City State	
At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO				

For help call 1-800-432-6242

3	Start Date _____ - _____ - <u>19</u> Month Day Year	End Date _____ - _____ - <u>19</u> Month Day Year
	Address _____ City _____ State _____	
	At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO	

4	Start Date _____ - _____ - <u>19</u> Month Day Year	End Date _____ - _____ - <u>19</u> Month Day Year
	Address _____ City _____ State _____	
	At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO	

5	Start Date _____ - _____ - <u>19</u> Month Day Year	End Date _____ - _____ - <u>19</u> Month Day Year
	Address _____ City _____ State _____	
	At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO	

Section D: Vacations

It is optional to include times you spent on vacation in the HEDR study area. Vacations may increase your dose estimate if: (a) the locations were closer to the Hanford site than your home was; (b) you drank milk from a cow owned by a family, friend or neighbor while you were there; and/or (c) the time you spent there was **over 1 week in 1945 and/or over 1 month in 1946-1957**. If you need more space, make a copy or add a sheet of paper.

6	Start Date _____ - _____ - <u>19</u> Month Day Year	End Date _____ - _____ - <u>19</u> Month Day Year
	Address _____ City _____ State _____	
	At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO	

7	Start Date _____ - _____ - <u>19</u> Month Day Year	End Date _____ - _____ - <u>19</u> Month Day Year
	Address _____ City _____ State _____	
	At this location did you drink milk from a cow owned by your family, relatives, friends or neighbors? (Circle your answer) YES NO	

After you have completed this form

1. Make sure Section A is filled out completely.
2. Make sure your addresses are complete. Include house number and street, if possible.
3. Mail this completed form to: Hanford Individual Dose Assessment Project, P. O. Box 47875, Olympia, WA 98504-7875.

For help call 1-800-432-6242